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FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION**

South Africa

Addendum

SUMMARY

The present addendum to the country note submitted to the Executive Board at its first regular session in January 1996 contains the final country programme recommendation for Board approval.

The Executive Director recommends that the Executive Board approve the country programme of South Africa for the period 1997 to 2001 in the amount of $5,200,000 from general resources, subject to the availability of funds, and $20,000,000 in supplementary funds, subject to the availability of specific-purpose contributions.

* E/ICEF/1996/18.

** The original country note provided only indicative figures for estimated programme cooperation. The figures provided in the present addendum are final and take into account unspent balances of programme cooperation at the end of 1995. They will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43/Add.2).

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THE SITUATION OF CHILDREN AND WOMEN

1. South Africa is an emerging democracy striving to build a non-racial society that overcomes the legacy of apartheid. It has the largest economy in sub-Saharan Africa with an estimated gross domestic product (GDP) per capita of $3,010, placing it among the richest 45 countries in the world. However, there are major disparities in incomes between the racial groups, with black households earning, on average, less than one tenth of the income of white households.

2. The population of 40.6 million is growing at an annual rate of 2.4 per cent, with Blacks/Africans constituting an estimated 76 per cent of the population, Whites 13 per cent, Coloureds 9 per cent and Indians 3 per cent. Structural poverty, i.e., disparity, along racial lines is one of the most challenging legacies of apartheid with its inherently unequal distribution of productive resources and gross disparity in access to all basic services.

3. The under-five mortality rate is estimated at 68 per 1,000 live births, but it is believed to range as high as 139 among black children in some areas. The infant mortality rate is estimated at 52 per 1,000 live births. The major causes of child deaths include perinatal causes, diarrhoeal diseases, acute respiratory infections, measles and tuberculosis, most of which are complicated by malnutrition.

4. Recent data from the 1994 national vitamin A study, conducted with the support of UNICEF and the Department of Health, indicate that 23 per cent of children under six years of age suffer from chronic malnutrition or stunting, with a disproportionately high number of disadvantaged children in black communities suffering from moderate to severe forms. There is also a high prevalence of micronutrient deficiencies, in particular vitamin A deficiency (33 per cent) and iron deficiency anaemia (21 per cent) among children aged 6 to 71 months. The most recent immunization coverage survey (1994) found immunization coverage by one year of age as follows: anti-tuberculosis vaccine, 95 per cent; three doses of oral polio vaccine, 72 per cent; three doses of combined diphtheria/pertussis/tetanus vaccine, 73 per cent; and measles vaccine, 76 per cent.

5. Overall health expenditure in South Africa represents approximately 6.4 per cent of gross national product, but it has been biased towards curative, specialist and urban services at the expense of primary health care (PHC). However, the new Government is strongly promoting universal access to PHC.

6. HIV/AIDS is expected to become a major factor in infant and child mortality in the next decade. On average, the rate for HIV prevalence among women attending antenatal clinics doubles every 13 months. As a result, the care of infected children and children orphaned as a result of parental AIDS could become a major societal responsibility, requiring substantial diversion of human, organizational and financial resources. It is estimated that by the year 2000, there could be 4 million people infected with HIV, 250,000 AIDS cases and 200,000 accumulated deaths as a result of HIV/AIDS. In 1995, children accounted for 11 per cent of the total number of reported AIDS cases.

7. Among the poorest 40 per cent of rural African households, the average time spent fetching water and fuel wood, usually by women, is about 4.5 hours per day. Rural households have poor access to sanitation and rely largely on pit latrines. In addition, about 30 per cent of African households live in shacks, with poor environmental sanitation.

8. Apartheid has also left a deep legacy of violence. Physical and other forms of abuse, along with a breakdown in the family unit due to migratory labour practices, have had devastating effects on the psycho-social development of children. Child abuse and neglect are serious and growing problems.

9. An estimated 200,000 children between the ages 10 and 14 years are engaged in various forms of labour, representing 4 per cent of all children between those ages. Preliminary research indicates that the sectors employing most child workers are agriculture, retail and catering, and manufacturing.

10. South Africa has high rates of educational participation, but poor levels of educational achievement, reflecting the low quality schooling imposed on the majority of the population by apartheid. Although almost all children aged 6-15 years are in school, the education system for black Africans is of relatively poor quality. The literacy rate of African adults was reported to be 48 per cent in 1992. In 1993, only 34 per cent of Africans aged 20-24 years had completed six years of schooling and thus are likely only to be able to provide unskilled labour.

PROGRAMME COOPERATION, 1994-1996

11. In 1994, the Executive Board approved a three-year (1994-1996) "bridging" programme for South Africa (E/ICEF/1994/P/L.19) which has focused on facilitating processes of change and contributing to the ongoing social sector transformation.

12. Major milestones and processes to which UNICEF has contributed during the period include: advocacy and international information exchange, leading to ratification of the Convention on the Rights of the Child on 16 June 1995; advocacy for the inclusion of provisions of the Convention in the new Constitution adopted by Parliament on 8 May 1996; incorporation of World Summit for Children goals and implementation of the Convention as explicit elements of the national development goals within the country's Reconstruction and Development Programme (RDP); establishment of a Children's Desk within the development section in the Office of the President; establishment of an intersectoral mechanism at Cabinet, departmental and provincial levels for the development of the National Programme of Action (NPA) for Children; the launch, by President Mandela of the NPA Framework and situation analysis report on "Children, Poverty, and Disparity Reduction" and also of provincial programmes of action on 31 May 1996; support to the highly innovative multi-media health promotion project, "Soul City", including its expanded use in neighbouring countries; and technical support for policy development (health, salt iodization, sanitation). The programme targeted the collection of data and information on children through support to a number of child-focused studies and surveys. Non-governmental organizations (NGOs) and the Government received support to prepare for and participate in the Fourth World Conference on Women and to increase their understanding of the Convention on the Elimination of All Forms of Discrimination Against Women.

13. The socio-political transformation process in South Africa has been constrained by a lack of capacity for social planning, weak local and district structures to support service delivery, and inadequate monitoring systems. The Government has adopted a consultative and consensus-seeking approach which has shown the importance of working with partners in the vibrant non-governmental, civic and academic spheres as well as with elected representatives at national, provincial and local levels. UNICEF has provided technical advice and

facilitated experience exchange in support of this approach. Furthermore, UNICEF support to the newly established provincial and local governments has taken on strategic importance, given the extensive devolution of resources and responsibilities for the provision of basic services.

14. The development of collaboration with the international donor community has been an important area of activity. UNICEF acknowledges support from the Government of Sweden through the Swedish International Development Authority for support to the expanded programme on immunization (EPI). That support enabled UNICEF, in collaboration with the World Health Organization (WHO), to provide technical assistance for the first national review of EPI implementation guidelines, the cold chain and a coverage survey.

15. The Nordic countries supported the development and printing of the situation analysis, which has provided a database upon which the country programme has been developed. The Government of Australia also contributed to this process. The donors which attended the planning meetings with the Government include the Overseas Development Authority (United Kingdom), the European Union and Japan. In addition, close contacts have been maintained at the country level with the Governments of Italy, the Netherlands and Ireland, as well as with the Commonwealth Secretariat.

Lessons learned

16. A number of lessons were learned during the past cooperation period which have been pivotal in guiding the direction and content of the proposed programme of cooperation. Requests from national counterparts for UNICEF support have focused on knowledge and experience exchange in addressing the needs of children and women and on innovative approaches in programme development. The very fluid process of governance and development during the period of post-apartheid transformation requires UNICEF and all development partners to maintain a flexible and adaptive approach to programming.

17. Financial resources are not the principal constraint to human development in general and child survival, development and protection in particular. In 1994, government spending on health and education alone exceeded 10 per cent of GDP (the equivalent of around $15 billion). Indeed, international official development assistance to South Africa is barely 2 per cent of the national development budget. Hence, it is strategic for UNICEF to help "make democracy work for children" through catalytic support to the restructuring of policies, programmes and delivery systems, thereby leveraging government resources towards child goals, sustainable human development and poverty alleviation.

18. Although South Africa has a wealth of trained personnel, they lack the required planning and management skills needed to transform the country into a thriving non-racial democracy. Therefore, South Africans need access to specific and relevant technical expertise and international experience to support capacity-building, orientation and the development of new approaches.

19. The well-developed private sector has significant investment in "social responsibility" programmes, which presents UNICEF with the opportunity to use data and information as tools to demonstrate how utilizing these resources to invest in children can be an economic as well as a moral imperative.

20. After many years of isolation, there is limited knowledge among many in Government and civil society of the individual and collaborative roles of the various United Nations agencies. As such, extensive advocacy and partnership-

building is necessary to ensure that the understanding of the United Nations agencies is increased for maximum and effective cooperation.

RECOMMENDED PROGRAMME COOPERATION, 1997-2001

General resources : $ 5,200,000
Supplementary funding: $20,000,000

Recommended programme cooperation a/

(In thousands of United States dollars)

	General resources	Supplementary funds	Total
Social policy and programme development	780	3 000	3 780
Public mobilization and programme communication	1 040	4 000	5 040
Health and nutrition	1 560	6 000	7 560
Hygiene and environmental sanitation	520	2 000	2 520
Education	780	3 000	3 780
Child protection	520	2 000	2 520
Total	5 200	20 000	25 200

a/ The breakdown for estimated yearly expenditures is given in table 3.

Programme preparation process

21. The 1997-2001 programme of cooperation has been prepared through a consultative process with the NPA Steering Committee established by the Government to develop and implement the NPA for Children in South Africa. The Steering Committee reports directly to the Core Group of Ministers, which is chaired by the Minister of Health and reports to Cabinet. The development of the country programme through the NPA sectoral task forces and the NPA Steering Committee has meant that an intersectoral approach to planning and implementation has been undertaken. Furthermore, the involvement of all nine provinces and the children's NGO sectors (represented by individual NGOs in sectoral committees and by the coalition group, the National Children's Rights Committee at the NPA Steering Committee) has ensured that the interests and concerns at subnational and NGO levels have been incorporated. The planning process and work plan were developed and agreed upon by the NPA Steering Committee. The preparation of the country programme has also involved collaboration with other United Nations agencies and bilateral donors who have participated in strategy and preview meetings with the Government.

Objectives and strategies

22. The 1997-2001 country programme has a process goal of moving from traditional service delivery-oriented programming towards a knowledge-based, flexible and adaptive approach which takes into account the strategic advantage

of UNICEF in South Africa and the unique cooperation through the intersectoral National and Provincial Programme of Action for Children Steering Committees. Working through these mechanisms will ensure a sustainable positive impact on reducing disparities and supporting the development of all South African children.

23. The programme aims to "make democracy work for children" by supporting processes which mobilize resources at all levels of society so that the goals for the year 2000 are met and the rights of all children and women are honoured. It is guided by the Convention on Rights of the Child and other international covenants and instruments, including the Convention on the Elimination of All Forms of Discrimination Against Women, as the moral minimum for ensuring that children's and women's needs, rights and concerns are entrenched in the new systems, structures and development paradigm in South Africa. The objectives of each of the sectoral programmes are targeted towards supporting sectoral reform to improve access by children to basic services and ensure that their rights are being addressed.

24. The country programme has five cross-cutting strategies: (a) support for policy and systems development; (b) advocacy, mobilization and partnership-building for the rights and well-being of children and women; (c) capacity-building in key areas affecting children and women at national, provincial and local levels; (d) child-focused monitoring, research, analysis, documentation and dissemination; and (e) demonstration of effective approaches with strategic partners in selected geographical areas for large-scale replication.

25. Support to human resources development through capacity-building, experiential exchange and information-sharing will be a critical component of the programme. Furthermore, the programme will focus on both national and subnational levels, simultaneously supporting capacity for improved planning, implementation, monitoring and evaluation at different levels. At the same time, support will be provided to community-based activities which demonstrate effective approaches and will serve as the basis for replication and adoption on a larger scale. UNICEF will continue to seek consensus and strengthen alliances with key stakeholders on issues of children, gender, disparity reduction and sustainable human development to ensure that the technical capacity to inform and motivate for social transformation across society is available. The main challenge and opportunity of the programme is for UNICEF to provide the analysis and know-how required to leverage public resources to increase the coverage, quality and effectiveness of services for children and women, and a more enabling environment for implementation.

Social policy and programme development

26. This programme aims to support national and subnational efforts to ensure that plans of action for children and women, in line with the World Summit for Children and the Beijing Platform of Action as well as with both Conventions, are implemented and monitored. UNICEF will work with national and subnational decision makers and programme managers to raise awareness and develop the skills required for incorporating the rights of children and women in policies and programmes. Technical support will be provided at national and provincial levels for implementation and monitoring of the NPA within the broader context of the national strategy for growth and development.

27. UNICEF will support the development of capacity, structures and methodology for collecting and organizing pertinent and reliable local data to monitor NPA progress, identify gaps and emerging disparities, mobilize communities and influence the allocation of human and financial resources across and within sectors. The programme aims to entrench child-focused monitoring as a key performance indicator of South Africa's development. Assistance will be provided for continuous situation analyses, social policy formulation, human resources development, monitoring and cost analysis, and the promotion of gender equity. The shift in focus from national to provincial and local authorities will facilitate the development of community-level participatory programmes for children. Support also will be provided to facilitate the development and implementation of child protection, care and PHC interventions in urban settings, including the mobilization of mayors, councillors and other municipal and civic leaders in support of local plans of action for children.

Public mobilization and programme communication

28. The three mutually reinforcing objectives of this programme are to (a) entrench children's concerns, including the RDP/NPA goals for children, as key points of reference in public discourse, within the branches of Government and civic and non-governmental organizations as well as communities and households in support of the creation of a broad-based movement for children; (b) strengthen the capacity of government and other partners to use communication channels and techniques more effectively to support behavioural adoption or change and the development of a more sensitized environment for achievement of RDP/NPA goals for children; and (c) mobilize resources from corporate and government sectors in support of these objectives. The documenting of experiences and processes will be a key function to contribute to the country's the international knowledge base. All elements of the programme have been determined as core, with the extent of their expansion being determined by the availability of supplementary resources. This is particularly relevant in the area of analytical documentation.

Health and nutrition

29. This programme will contribute to health sector reform, thereby helping to create a comprehensive PHC system that is accessible to all South Africans, especially children, in order to contribute to the reduction of the major causes of child mortality and morbidity. Priorities will include assistance to policy reorientation; the strengthening of planning at national, provincial and district levels; the reorientation of health workers; and the restructuring of delivery, management and information systems. The programme will work closely with other United Nations agencies, including WHO and the United Nations Population Fund (UNFPA), along with bilateral donor agencies and institutions.

30. In particular, the programme will contribute to the reduction of the EPI vaccine-preventable diseases; the reduction in mortality due to diarrhoeal diseases (through the promotion of oral rehydration therapy); the reduction of vitamin A deficiency; the virtual elimination of iodine deficiencies; the promotion of breast-feeding; implementation of community-based health and nutrition interventions, with a focus at the household and community level; and the development of reproductive health services and the promotion of good quality maternal care. Programme communication for effective behaviour modification will be of crucial importance.

Hygiene and environmental sanitation

31. This programme will support sanitation policy development, including consensus-building and networking, to ensure a common vision towards the provision of sanitation as a priority for development. To ensure the operationalization of policy and strategy, the programme will support the building of capacity through training of environmental health workers to enable them to undertake hygiene education. In addition, support will be provided to strengthen the sanitation monitoring system.

32. The second major area of support will focus on mobilizing communities to enable them to participate in promoting good personal hygiene practices and improved environmental sanitation. Through intersectoral action, hygiene awareness and communication activities will be undertaken covering personal, domestic and environmental aspects, with an overall aim of achieving sustained behaviour change. Experience sharing within South Africa and internationally will be facilitated as a major strategy towards reaching the programme objectives. Research will be supported to provide a firm basis for social mobilization and communication activities. UNICEF will also support field testing of technological options in water supply and sanitation. The availability of supplementary resources will determine the extent to which these latter components can be implemented.

Education

33. This programme will promote greater retention and learning among primary school students and improve the quality of early childhood education and care, especially for disadvantaged groups, such as black African girls, in urban and rural areas. Cooperation with the United Nations Educational, Scientific and Cultural Organization (UNESCO) is a key element of the programme to ensure the most efficient use of resources and capacities of United Nations agencies. Community-school linkages will be strengthened by testing and formulating viable strategies for school governance. Effective use of educational resources will be pursued through the adaptation of instruments to strengthen learning assessment in primary schools. A unified national policy on early childhood development and care will be developed, with an emphasis on a community-based approach. Technical support will be provided to improve guidance and counselling for primary school students affected by psycho-social trauma.

Child protection

34. This programme will support policy formulation, programme implementation and capacity development in public and non-governmental agencies to analyse and address the needs and promote the rights of children in especially difficult circumstances, focusing on the special protection measures of the Convention on the Rights of the Child. This element will comprise the core of the programme. Priority groups of children identified by the NPA Steering Committee for specific UNICEF support are working children, abused and neglected children, children affected by HIV/AIDS and children in conflict with the law. The support provided by UNICEF in these areas is dependent upon the availability of supplementary resources. The programme strategy will emphasize support for the review and revision of legislation, redefinition of public policy, human resources development for implementation of preventative and rehabilitative measures, and the development, analysis and dissemination of innovative community-based approaches. International experience sharing and exchanges will constitute an important strategy for accelerating programme development.

Monitoring and evaluation

35. Monitoring and evaluation are key activities throughout the country programme, ensuring effective project management, regular assessment of processes and outcomes, and course correction as necessary. To facilitate a coordinated approach to country programme monitoring and evaluation, an integrated intersectoral monitoring, evaluation and research plan has been developed within the framework of the two Conventions.

36. A preliminary set of input, output, process and impact indicators has been identified, with indicators drawn from regular data collection systems already in existence in the country as well as from those that will be developed and extended during the course of the programme. Use will also be made of data resulting from specific research and survey initiatives supported by UNICEF, other United Nations agencies and partners. In addition to improving the design and management of the programme, monitoring and evaluation will also seek to contribute to the monitoring and management of the wider transformation processes aimed at investing in and sustaining social development in South Africa.

37. Project inputs and budget monitoring will be undertaken through the UNICEF Global Field Support System. Annual reviews will be undertaken under the purview of the NPA Steering Committee. The NPA framework launched by President Mandela in May 1996 has made provision for annual reviews of progress towards implementation of the NPA at provincial and national levels. Through this process, public discussion and dissemination of information related to NPA implementation will be promoted. Furthermore, monitoring of the Convention on the Rights of the Child as well as the preparation of the country report to the United Nations Committee on the Rights of the Child will be undertaken for the first time in July 1997, and every five years thereafter. A mid-term review of the programme will be conducted in 1999, supported by specific surveys and evaluations. The mid-term review will provide a critical analysis of the strategic direction and input of UNICEF and take stock of how far the transformation process has evolved in order to examine any fundamental amendments to programme direction, including office staffing and structure.

Coordination with other agencies

38. The Government of South Africa/UNICEF 1997-2001 programme of cooperation has been developed in close consultation and with the involvement of other United Nations agencies and international development partners.

39. The United Nations system in South Africa is committed to and striving for optimum collaboration among member agencies present in the country. The steps taken include moving into common office premises by the end of 1996; the sharing of common services, which will provide a further opportunity for rationalization of operational costs; the formation of theme groups in social policy (including gender and poverty monitoring), population/health (which includes bilateral donors); and information/communication. A Joint United Nations Programme on HIV/AIDS (UNAIDS) theme group has also been established. A country strategy note is being prepared jointly with the Government.

40. UNICEF will collaborate with the United Nations Development Programme (UNDP), WHO, UNESCO, UNFPA and UNAIDS to provide technical support and the sharing of international best practice to support the transformation in post-apartheid South Africa. UNICEF will collaborate with UNDP in monitoring disparity and poverty reduction. Given that much of the poverty in South Africa

is rooted in the legacy of apartheid policies, well-coordinated efforts will be needed to assist the Government to address the inherent disparities. The UNDP PHC programme is planned with WHO, the lead agency, and will complement UNICEF support in the health sector. UNICEF will expand its collaboration with UNFPA to support the development of reproductive health services and will collaborate with WHO to support maternal and child health activities. Support for HIV/AIDS initiatives, including that of the child protection programme, will be under the framework of UNAIDS.

Fund-raising strategy

41. The UNICEF South Africa office is presently developing a resource mobilization strategy for raising supplementary funds for the country programme, both with the international community and within the local private sector. UNICEF will utilize general resources to support the country programme in the mobilization of human resources with adequate skills for making a positive contribution during this period of transformation in South Africa and to support advocacy, mobilization of communities and programme monitoring. Resources will also be mobilized internationally and domestically from the Government as well as the private sector to support programmes for children. A particular strategy will focus on mobilizing intellectual support from donor countries as part of their funding contribution to the programme. UNICEF will continue to collaborate with UNESCO in education programming and with the International Labour Organisation in child labour programmes.

Programme management

42. Implementation of the country programme will be coordinated through existing national and subnational mechanisms established by Government for the development and implementation of the NPA for Children. UNICEF will aim to recruit staff with the necessary skills mix and experience to facilitate implementation of this knowledge-based programme. The office will be structured into three major sections: Social Policy and Mobilization; Health, Nutrition, Hygiene and Environmental Sanitation; and Education and Child Protection. Annual project plans of action and work plans will be developed and implemented. Overall programme reviews will be undertaken on an annual basis, thereby providing the frame of reference for the formulation of the following year's activities. Review of implementation in specific activities will be undertaken during the bi-monthly meetings of the NPA Steering Committee.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

South Africa	(1994 and earlier years)			UNICEF country classification
Under-five mortality rate	68	(1994)		Middle U5MR
Infant mortality rate	52	(1994)		High IMR
GNP per capita	$ 3010	(1994)		Middle-income GNP
Total population	40.6 million	(1994)		

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1990	1994
Births	(thousands)	875	1065	1187	1247
Infant deaths (under 1)	(thousands)	70	72	66	64
Under-five deaths	(thousands)	94	97	87	85
Under-five mortality rate (per 1,000 live births)		108	91	73	68
Infant mortality rate (under 1) (per 1,000 live births)		80	68	55	52

		About 1980	Most recent
Underweight children (under 5)	Moderate & severe	..	9 **
(% weight for age, 1994)	Severe	..	1 **
Babies with low birth weight (%)		..	..
Primary school children reaching grade 5 (%, 1990)		..	71

NUTRITION INDICATORS	About 1980	Most recent
Exclusive breast-feeding rate (<4 mos.) (%)	..	..
Timely complementary feeding rate (6-9 mos.) (%)	..	..
Continued breast-feeding rate (20-23 mos.) (%)	..	..
Prevalence of wasting (0-59 mos.) (%, 1994)	..	3 **
Prevalence of stunting (0-59 mos.) (%, 1994)	..	23 **
Daily per capita calorie supply (% of requirements, 1988-90)	..	128
Total goitre rate (est.)	..	2
Household expenditure (% of total income, 1980 or 1985)	All food/cereals .. / ..	34 / ..

HEALTH INDICATORS		About 1980	Most recent
ORT use rate (%)		..	..
Access to health services	Total	..	..
(% of population)	Urban/rural	.. / ..	.. / ..
Access to safe water	Total	..	70
(% of population, 1994)	Urban/rural	.. / ..	99 / 53
Access to adequate sanitation	Total	..	48
(% of population, 1994)	Urban/rural	.. / ..	85 / 12
Births attended by trained personnel (%)		..	..
Maternal mortality rate (per 100,000 live births, 1990)		..	230

Immunization		1981	1985	1990	1994
One-year-olds (%) immunized against:	Tuberculosis	..	..	59	95
	DPT	..	..	74	73
	Polio	..	..	76	72
	Measles	..	..	79	76
Pregnant women (%) immunized against:	Tetanus	..	..	..	..

* 6-71 months.

TABLE 1 (continued)

South Africa

EDUCATION INDICATORS		About 1980	Most recent
Primary enrolment ratio (gross/net)	Total	103 / ..	111 / 92
(%, 1986/1993)	Male	103 / ..	111 / 90
	Female	103 / ..	110 / 93
Secondary enrolment ratio (gross/net)	Total	55 / ..	77 / 46
(%, 1986/1993)	Male	52 / ..	71 / 43
	Female	59 / ..	84 / 49
Adult literacy rate, 15 years & older	Total	76	82
(%, 1980/1995)	Male/female	77 / 75	82 / 82
Radio/television sets (per 1,000 population, 1980/1993)		274 / 69	314 /101

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DEMOGRAPHIC INDICATORS		1970	1980	1990	1994	2000
Total population	(thousands)	22458	29170	37066	40555	46215
Population aged 0-15 years	(thousands)	9710	12382	14988	16070	17676
Population aged 0-4 years	(thousands)	3422	4491	5154	5559	6070
Urban population (% of total)		47.8	48.1	49.2	49.9	53.1
Life expectancy at birth	Total	53	57	62	64	66
(years)	Male	50	54	59	61	63
	Female	56	60	65	67	69
Total fertility rate		5.7	4.9	4.2	4.0	3.7
Crude birth rate (per 1,000 population)		39	37	32	31	29
Crude death rate (per 1,000 population)		14	12	9	9	7

		About 1980	Most recent
Contraceptive prevalence rate (%, 1989)		..	50
Population annual growth rate	Total	2.6	2.4
(%, 1965-1980/1980-1994)	Urban	2.7	2.7

ECONOMIC INDICATORS		About 1980	Most recent
GNP per capita annual growth rate (%, 1973-1985/1985-1994)		0.0	-1.4
Inflation rate (%, 1980-1985/1985-1994)		13	14
Population in absolute poverty (%)	Urban/rural	.. / ..	.. / ..
Household income share (%, 1993)	Top 20%/bottom 40%	.. / ..	63 / 9
Government expenditure	Health/education	.. / ..	.. / ..
(% of total expenditure)	Defence	..	..
Household expenditure	Health/education	.. / ..	.. / ..
(% share of total)			
Official development assistance:	$US millions	..	294
(1980/1994)	As % of GNP	..	0
Debt service (% of goods and services exports		..	..

COUNTRY: SOUTH AFRICA
LATEST BOARD APPROVAL: 1994
GENERAL RESOURCES: $11 000 000

TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1992-1996 a/

(In thousands of United States dollars)

Programme sectors/areas	Supplies and equipment (actual)		Training grants (actual)		Project staff (actual)		Other cash (actual)		TOTAL					
									General resources b/		SF		Total (GR & SF)	
	GR b/	FSF	GR b/	FSF	GR b/	FSF	GR b/	FSF	Actual	Planned c/	Actual	Planned c/	Actual	Planned
Health	43	11	5	0	379	39	1 249	527	1 676	1 900	576	6 600	2 252	8 500
Nutrition	13	0	0	0	16	0	452	115	481	1 100	115	1 200	596	2 300
Education	24	0	0	0	164	0	342	0	530	950	0	2 500	530	3 450
Community organization and development	0	0	0	84	0	0	0	134	0	0	218	0	218	0
Women-centred programme	0	0	0	0	0	0	196	0	196	300	0	1 200	196	1 500
Children in especially difficult circumstances	137	5	0	0	78	19	197	235	412	400	259	2 400	671	2 800
Social mobilization and advocacy	29	0	0	0	55	0	157	0	241	2 400	0	1 500	241	3 900
Planning and social statistics	19	0	0	0	400	4	1 542	12	1 961	900	16	600	1 977	1 500
Programme support	188	0	0	0	1 289	0	577	0	2 055	2 450	0	0	2 055	2 450
Integrated area-based programme d/	0	0	0	0	0	0	0	0	0	300	0	1 900	0	2 200
Emergency	10	0	0	0	0	0	186	15	197	300	15	1 500	212	1 800
GRAND TOTAL	464	16	5	84	2 380	61	4 899	1 039	7 748	11 000	1 200	19 400	8 948	30 400

GR = General resources.
FSF = Funded supplementary funding.
SF = Supplementary funding, funded and unfunded.
a/ Actual expenditure includes expenditure recorded as of 31 December 1995.
b/ Actual GR expenditure includes allocations from global funds.
c/ Including three years bridging programmes (E/ICEF/1994/P/L.19).
d/ Expenditures against integrated area-based programme have been accounted for in the appropriate sectoral programmes.

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TABLE 3

PLANNED YEARLY EXPENDITURES

COUNTRY: SOUTH AFRICA
PROGRAMME CYCLE: 1997-2001

(In thousands of United States dollars)

		1997	1998	1999	2000	2001	TOTAL
SOCIAL POLICY AND PROG. DEV.	GR	180	150	150	150	150	780
	FSF						
	NSF	600	600	600	600	600	3,000
	TOTAL	780	750	750	750	750	3,780
PUB. MOBILIZ. AND PROG. COMMUN.	GR	240	200	200	200	200	1,040
	FSF						
	NSF	960	960	795	650	635	4,000
	TOTAL	1,200	1,160	995	850	835	5,040
HEALTH AND NUTRITION	GR	360	300	300	300	300	1,560
	FSF						
	NSF	1,200	1,200	1,200	1,200	1,200	6,000
	TOTAL	1,560	1,500	1,500	1,500	1,500	7,560
HYGIENE/ENVIRONMENTAL SANITATION	GR	120	100	100	100	100	520
	FSF						
	NSF	391	401	416	396	396	2,000
	TOTAL	511	501	516	496	496	2,520
EDUCATION	GR	180	150	150	150	150	780
	FSF						
	NSF	550	655	655	595	545	3,000
	TOTAL	730	805	805	745	695	3,780
CHILD PROTECTION	GR	120	100	100	100	100	520
	FSF						
	NSF	400	400	400	400	400	2,000
	TOTAL	520	500	500	500	500	2,520
TOTAL	GR	1,200	1,000	1,000	1,000	1,000	5,200
	FSF						
	NSF	4,101	4,216	4,066	3,841	3,776	20,000
	TOTAL	5,301	5,216	5,066	4,841	4,776	25,200

GR = general resources.
FSF = funded supplementary funding.
NSF = new supplementary funding.

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TABLE 4

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

COUNTRY : SOUTH AFRICA
PROGRAMME : 1997-2001

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET (In thousands of US dollars)				POSTS a/										STAFF COSTS b/ (In thousands of US dollars)		
	GR	FSF	NSF	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
GENERAL RESOURCES :																	
SOCIAL POLICY AND PROG. DEV.	780			780	0	0	1	0	0	0	1	0	0	1	812.8	0.0	812.8
PUB. MOBILIZ. AND PROG. COMMUN.	1,040			1,040	0	0	0	1	0	0	1	0	1	2	747.4	105.9	853.3
HEALTH AND NUTRITION	1,560			1,560	0	0	1	0	0	0	1	0	1	2	812.8	105.9	918.7
HYGIENE/ENVIRONMENTAL SANITATION	520			520	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0
EDUCATION	780			780	0	0	0	0	0	0	0	1	1	2	0.0	460.9	460.9
CHILD PROTECTION	520			520	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0
TOTAL GR	5,200			5,200	0	0	2	1	0	0	3	1	3	7	2,373.0	672.7	3,045.7
SUPPLEMENTARY FUNDING :																	
SOCIAL POLICY AND PROG. DEV.		0	3,000	3,000	0	0	0	0	1	0	1	1	1	3	680.9	460.9	1,141.8
PUB. MOBILIZ. AND PROG. COMMUN.		0	4,000	4,000	0	0	0	0	0	0	0	0	1	1	0.0	125.0	125.0
HEALTH AND NUTRITION		0	6,000	6,000	0	0	0	0	0	0	0	1	1	2	0.0	460.9	460.9
HYGIENE/ENVIRONMENTAL SANITATION		0	2,000	2,000	0	0	0	1	0	0	1	0	0	1	747.4	0.0	747.4
EDUCATION		0	3,000	3,000	0	0	0	1	0	0	1	0	1	2	747.4	125.0	872.4
CHILD PROTECTION		0	2,000	2,000	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0
TOTAL SF		0	20,000	20,000	0	0	0	2	1	0	3	2	4	9	2,175.7	1,171.8	3,347.5
TOTAL GR & SF	5,200	0	20,000	25,200	0	0	2	3	1	0	6	3	7	16	4,548.7	1,844.5	6,393.2
ADM. & PROGRAMME SUPPORT BUDGET	Operating costs			1,287.4													
	Staffing				0	0	1	0	1	0	2	3	6	11	1,493.8	1,703.0	3,196.8
GRAND TOTAL (GR+SF+ADM)					0	0	3	3	2	0	8	6	13	27	6,042.5	3,547.5	9,590.0
Number of posts and staff costs:																	
Current programme cycle											8	2	9	19			
At the end of proposed programme cycle (indicative only)											8	6	13	27	6,042.5	3,547.5	9,590.0

GR = general resources.
SF = supplementary funding.
FSF = funded supplementary funding.
NSF = new supplementary funding.
IP = international Professional.
NP = national Professional.
GS = General Service.
ADM = administrative.

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Exclude temporary assistance and overtime; include costs of United Nations volunteers.